

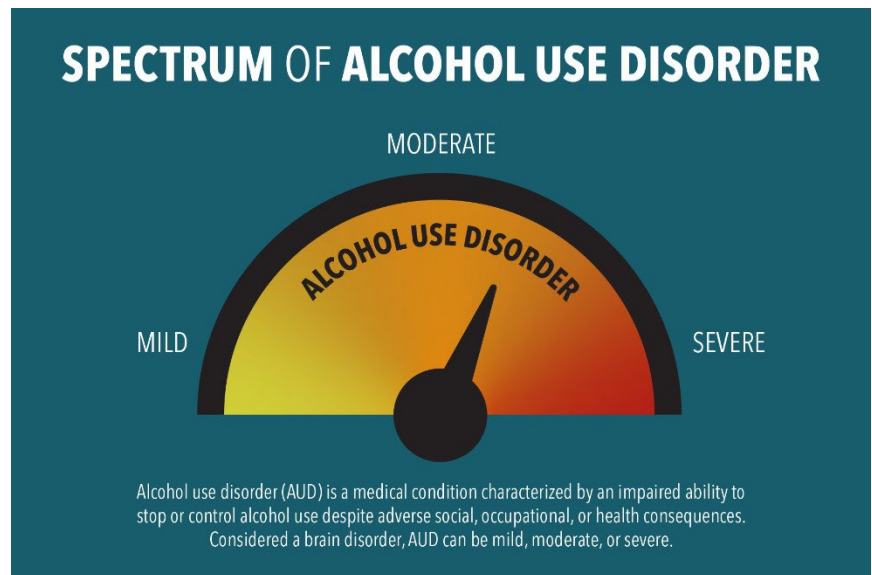


# Understanding Alcohol Use Disorder

Alcohol use disorder (AUD) is a medical condition characterized by an impaired ability to stop or control alcohol use despite adverse social, occupational, or health consequences. It encompasses the conditions that some people refer to as alcohol abuse, alcohol dependence, alcohol addiction, and the colloquial term, alcoholism.

Considered a brain disorder, AUD can be mild, moderate, or severe.

Lasting changes in the brain caused by alcohol misuse perpetuate AUD and make individuals vulnerable to relapse. The good news is that no matter how severe the problem may seem, evidence-based treatment with behavioral therapies, mutual-support groups, and/or medications can help people with AUD achieve and maintain recovery. According to the 2021 National Survey on Drug Use and Health, 28.6 million adults ages 18 and older (11.3% in this age group) had AUD in 2021.<sup>1,2</sup> Among youth, an estimated 894,000 adolescents ages 12 to 17 (3.4% in this age group) had AUD during this time frame.<sup>1,2</sup>



## What Increases the Risk for Alcohol Use Disorder?

A person's risk for developing AUD depends in part on how much, how often, and how quickly they consume alcohol. Alcohol misuse, which includes [binge drinking](#) and [heavy alcohol use](#), over time increases the risk of AUD. Other factors also increase the risk of AUD, such as:

- » **Drinking at an early age.** A recent national survey found that among people ages 26 and older, those who began drinking before age 15 were more than three times as likely to report having AUD in the past year as those who waited until age 21 or later to begin drinking.<sup>3</sup> The risk for females in this group is higher than that of males.
- » **Genetics and family history of alcohol problems.** Genetics play a role, with heritability accounting for approximately 60%; however, like other chronic health conditions, AUD risk is influenced by the interplay between a person's genes and their environment. Parents' drinking patterns may also influence the likelihood that a child will one day develop AUD.
- » **Mental health conditions and a history of trauma.** A wide range of psychiatric conditions—including depression, post-traumatic stress disorder, and attention deficit hyperactivity disorder—are comorbid with AUD and are associated with an increased risk of AUD. People with a history of [childhood trauma](#) are also vulnerable to AUD.

## What Are the Symptoms of Alcohol Use Disorder?

Health care professionals use criteria from the *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition (DSM-5), to assess whether a person has AUD and to determine the severity, if the disorder is present. Severity is based on the number of criteria a person meets based on their symptoms—mild (2–3 criteria), moderate (4–5 criteria), or severe (6 or more criteria).

A health care provider might ask the following questions to assess a person's symptoms.

In the past year, have you:

- » Had times when you ended up drinking more, or longer, than you intended?
- » More than once wanted to cut down or stop drinking, or tried to, but couldn't?
- » Spent a lot of time drinking, being sick from drinking, or getting over other aftereffects?
- » Wanted a drink so badly you couldn't think of anything else?
- » Found that drinking—or being sick from drinking—often interfered with taking care of your home or family? Or caused job troubles? Or school problems?
- » Continued to drink even though it was causing trouble with your family or friends?
- » Given up or cut back on activities you found important, interesting, or pleasurable so you could drink?
- » More than once gotten into situations while or after drinking that increased your chances of getting hurt (such as driving, swimming, using machinery, walking in a dangerous area, or unsafe sexual behavior)?
- » Continued to drink even though it was making you feel depressed or anxious or adding to another health problem? Or after having had an alcohol-related memory blackout?
- » Needed to drink much more than you once did to get the effect you want? Or found that your usual number of drinks had much less effect than before?
- » Found that when the effects of alcohol were wearing off, you had withdrawal symptoms, such as trouble sleeping, shakiness, restlessness, nausea, sweating, a racing heart, dysphoria (feeling uneasy or unhappy), malaise (general sense of being unwell), feeling low, or a seizure? Or sensed things that were not there?

Any of these symptoms may be cause for concern. The more symptoms, the more urgent the need for change.

## What Are the Types of Treatment for Alcohol Use Disorder?

Several evidence-based treatment approaches are available for AUD. One size does not fit all, and a treatment approach that may work for one person may not work for another. Treatment can be outpatient and/or inpatient and be provided by specialty programs, therapists, and health care providers.

### Medications

Three medications are currently approved by the U.S. Food and Drug Administration to help people stop or reduce their drinking and prevent a return to drinking: naltrexone (oral and long-acting injectable), acamprosate, and disulfiram. All these medications are nonaddictive, and they may be used alone or combined with behavioral treatments or mutual-support groups.

### Behavioral Treatments

Behavioral treatments—also known as alcohol counseling, or talk therapy, and provided by licensed therapists—are aimed at changing drinking behavior. Examples of behavioral treatments are brief interventions and reinforcement approaches, treatments that build motivation and teach skills for coping and preventing a return to drinking, and mindfulness-based therapies.

## Mutual-Support Groups

Mutual-support groups provide peer support for stopping or reducing drinking. Group meetings are available in most communities at low or no cost, and at convenient times and locations—including an increasing presence online. This means they can be especially helpful to individuals at risk for relapse to drinking. Combined with medications and behavioral treatment provided by health care professionals, mutual-support groups can offer a valuable added layer of support.

Please note: People with severe AUD may need medical help to avoid alcohol withdrawal if they decide to stop drinking. Alcohol withdrawal is a potentially life-threatening process that can occur when someone who has been drinking heavily for a prolonged period of time suddenly stops drinking. Doctors can prescribe medications to address these symptoms and make the process safer and less distressing.

## Can People With Alcohol Use Disorder Recover?

Many people with AUD do recover, but setbacks are common among people in treatment. Seeking professional help early can prevent a return to drinking. Behavioral therapies can help people develop skills to avoid and overcome triggers, such as stress, that might lead to drinking. Medications also can help deter drinking during times when individuals may be at greater risk of a return to drinking (e.g., divorce, death of a family member).

## Need Help?

If you are concerned about your alcohol use and would like to explore whether you might have AUD, please visit the [Rethinking Drinking website](#).

To learn more about alcohol treatment options and search for quality care near you, please visit the [NIAAA Alcohol Treatment Navigator](#).

**For more information about alcohol and your health, please visit: [niaaa.nih.gov](https://niaaa.nih.gov)**

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According to the Substance Abuse and Mental Health Services Administration (SAMHSA), caution should be used when comparing estimates from the 2020 and 2021 National Survey on Drug Use and Health to those from prior years due to methodological changes. Prior to the COVID-19 pandemic, data were collected during in-home visits, using computer-assisted techniques. The COVID-19 pandemic necessitated a delay in data collection during 2020 and the introduction of web-based data collection, with very limited in-person data collection. The criteria used to categorize AUD among respondents also changed in 2020 from the fourth edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV) to the fifth edition (DSM-5), resulting in some differences in whom is classified as having an AUD. Specifically, DSM-5 criteria could lead to a diagnosis of AUD for some respondents with too few symptoms to be diagnosed using DSM-IV criteria. Because these changes in data collection coincided with the spread of the COVID-19 pandemic and any related behavioral or mental health changes, we cannot fully separate the effects of methodological changes from true changes in the outcomes. Please see the [Methodological Summary and Definitions](#) for more information.

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1. SAMHSA, Center for Behavioral Health Statistics and Quality. 2021 National Survey on Drug Use and Health. Table 5.6A—Alcohol use disorder in past year: among people aged 12 or older; by age group and demographic characteristics, numbers in thousands, 2021. Available from: <https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect5pe2021.htm#tab5.6a>
  2. SAMHSA, Center for Behavioral Health Statistics and Quality. 2021 National Survey on Drug Use and Health. Table 5.6B—Alcohol use disorder in past year: among people aged 12 or older; by age group and demographic characteristics, percentages, 2021. Available from: <https://www.samhsa.gov/data/sites/default/files/reports/rpt39441/NSDUHDetailedTabs2021/NSDUHDetailedTabs2021/NSDUHDetTabsSect5pe2021.htm#tab5.6b>
  3. The comparison of risk for an AUD between different ages at drinking onset is based on the prevalence ratio. The estimates are weighted by the person-level analysis weight and derived from the Center for Behavioral Health Statistics and Quality 2021 National Survey on Drug Use and Health (NSDUH-2021-DS0001) public-use data file. Age at drinking onset: age when first drank an alcohol beverage (a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it), not counting a sip or two from a drink. AUD: having met two or more of the 11 AUD diagnostic criteria in the past-year according to the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5). [cited 2023 Feb 28]. Available from: <https://www.datafiles.samhsa.gov/dataset/national-survey-drug-use-and-health-2021-nsduh-2021-ds0001>



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